PTO/SB/17 (10-04v2)

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FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

____ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

(\$) 790.00

Complete if Known		
Application Number	09/853,126	RECEIVED
Filing Date	May 9, 2001	THEFT
First Named Inventor	LEMLEY, Brad	NOV 2 3 2004
Examiner Name	DANIEL JR., W	ülie.J.
Art Unit	2686	Technology Center 260
Attorney Docket No.	UTL 00047	

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The Director is authorized to: (check all that apply)			
Charge fee(s) indicated below Credit any overpayments 1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
✓ Charge any underpayment of fee(s) 1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee 1805 1,840* Requesting publication of SIR after			
to the above-identified deposit account. Examiner action 1251 110 2251 55 Extension for reply within first month			
TEL CALCULATION			
Fee Fee Fee Fee Description Fee Paid 1254 1 520 2054 705			
Code (\$)			
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170 Tilling a oner ill support of all appeal			
1005 100 cost as			
1451 1,510 Petition to institute a public use proceeding			
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from 1453 1,370 2453 685 Petition to revive - unintentional 1501 1,370 2501 685 Utility issue fee (or reissue)			
Extra Claims below Eco Poid (co. 10.0000)			
Total Claims X = X = X = X = X = X = X =			
Claims			
Multiple Dependent			
Large Entity Small Entity 1806 180 1806 180 Submission of Information Disable Oct			
Code (\$) Code (\$)			
1202 18 2202 9 Claims in excess of 20 property (times number of properties)			
1201 88 2201 44 Independent claims in excess of 3 1809 790 2809 395 Filing a submission after final rejection (37 CFR 1.129(a))			
1203 300 2203 150 Multiple dependent claim, if not paid 1810 790 2810 395 For each additional invention to be			
1204 88 2204 44 ** Reissue independent claims examined (37 CFR 1.129(b))			
over original patent 1801 790 2801 395 Request for Continued Examination (RCE) 790.0	0		
1205 18 2205 9 ** Reissue claims in excess of 20 1802 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) Other fee (specify)			
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 790.00			
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